

Dog Health Questionnaire

This form is available to download on our website www.elliottbayah.com

Please take the time to answer the following questions regarding your dog. The veterinarian will review this questionnaire with you in your dog's appointment.

What kind of food do you feed your dog? _____ How much do you feed? _____

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| 1. Does your dog have a microchip? | YES | NO |
| 2. Have you noticed any new lumps or bumps? | YES | NO |
| 3. Is your dog itching, scratching, shaking head or chewing on skin? | YES | NO |
| 4. Is your dog sneezing or coughing? | YES | NO |
| 5. Have you noticed that your dog has bad breath? | YES | NO |
| 6. Is your dog having abnormal bowel movements? | YES | NO |
| 7. Have your dog's urination habits changed?..... | YES | NO |
| 8. Has your dog's appetite changed (increased / decreased)? | YES | NO |
| 9. Has your dog's water intake changed (increased / decreased)? | YES | NO |
| 10. Has your dog's energy level changed, slowing down or lagging on walks? Increased energy? ... | YES | NO |
| 11. Does your dog limp, have difficulty rising, jumping or climbing stairs or act sore after exercise? .. | YES | NO |
| 12. Has your dog recently gained or lost weight? | YES | NO |
| 13. Have you noticed changes in behavior? | YES | NO |
| 14. Is your dog on any medications, supplements or human products? | YES | NO |
| 15. Do you need any prescriptions refilled today? | YES | NO |
| 16. Have you noticed any change in your dog's vision or hearing? | YES | NO |
| 17. Has your dog ever shown aggression towards people or animals? | YES | NO |
| 16. Does your dog meet other dogs (boarding, daycare, parks)? | YES | NO |
| 17. Is your dog on any internal parasite control medications? Heartworm preventative?..... | YES | NO |
| 18. Is your dog on a monthly flea medication? | YES | NO |
| 19. Do you have any travel plans with your dog in the next 12 months? | YES | NO |
| 20. Do you provide home dental care for your dog? | YES | NO |
| 21. Are there any other questions or concerns you would like to discuss today? | YES | NO |

Date: _____ Name: _____ Pet's Name _____